

Rec'd PCT/PTO 24 AUG 2005 P24166US 10/524611

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Approved for use through 9/30/00

							RIMENT OF COMMERCE				
PTO/SB/01			Atton	ney Docke	t Number	1935-001	54				
(8/96)			First	First Named Inventor Johnny Nilsson							
	ARATION				COMPLETE IF KNOWN						
Declaration	OR	Declaration	Apoli	cation Nur	nber	10/524,61	1				
☐ Submitted with		Submitted a		Date							
Initial Filing		Initial Filing		p Art Unit			· · · · · · · · · · · · · · · · · · ·				
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As a below named inventor, I hereby declare that:											
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
GOLF CLUB DEVICE											
(Title of the Invention)											
Control of the contro											
the specification of which											
☐ is attached hereto	•										
OR ·				_							
was filed on (MM/DD)	/ / ///)	08/15/2003	3	as Uni	ited States A	pplication N	lumber or PCT				
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International Number (if applicable). PCT/NO2003/000277 and was amended on (MM/DD/YYYY) 11/12/2004											
I hereby state that I have amended by any amende				nts of the a	above identifi	ed specifica	ation, including the claims, as				
I acknowledge the duty	to disclose	information	which is mate	erial to pat	entability as	defined in	37 C.F.R. 1.56, including for				
continuation-in-part appli	ications, m	aterial inform	ation which b	ecame ava	ailable betwe	en the filing	g date of the prior application				
and the national or PCT	internation	al filing date c	of the continua	ation-in-pa	rt application	·					
I hereby claim foreign pri	iority bene	fits under Title	35, United S	States Cod	e §119(a)-(d) or §365(b) of any foreign application(s)				
for patent, inventor's or p	plant breed	er's rights cer	tificate(s), or	§365(a) of	fany PCT int	ernational a	application which designed at				
least one country other t	han the Ui	nited States o	f America, list	ted below	and have als	so identified	I below, by checking the box,				
					e(s), or of an	y PCT inte	rnational application having a				
filing date before that of t											
Prior Foreign		ountry	Foreign Filir	ng Date	Priority No		Copy Attached?				
Application Number(s)		·	(MM/DD/Y		Claimed		YES NO				
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U.S. Parent Ap	plication		Parent Nu		Pa	rent F	iling D	ate				ent Number	
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□ Additional U	S. or PCT	internat	tional applic	cation nui	nbers a	re liste	d on a	suppleme	ental p	priority	sheet at	tached hereto.	
As a named invall business in t	ventor, I he he Patent a	reby ap and Trac	point the fo demark Offi	ollowing a ice conne	ttorney(ected the	s) and rewith	l/or ag	ent(s) to p	orosec	ute thi	s applica	ation and to transact	
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Name			Registratio Number	n		Na	me		Registration Number				
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CITY	Milwauke	e	· - · -		STATE	. v	/iscon	sin	·	ZIP (ODE	53202-4178	
COUNTRY	U.S.A.			TELE	PHONE	. (114) 2	71-7590		FAX	(4	14) 271-5770	
I hereby declare and belief are statements and	that all state that the like so that such	be true made willful f	ie; and fu are punish alse statem	rein of murther that hable by nents may	y own ka t these fine or y jeopard	nowled stated impris dize th	dge ar nents onmer e valic	e true and were mad nt, or both	de wit , unde applica	all state h the er §10 ation o	knowled 01 of Ti	made on information ige that willful false tle 18 of the United tent issued thereon.	
Given I	Name (first	and mi	ddle [if any					amily Nam			пе		
Johnny						Nils	son						
Inventor's Signature	70	m	m/U_i	·Ksn			_	Date					
RESIDENCE: C	City Täb	X, C	EX	State		Cour	ntry	Sweden	-	Citize	enship	Swedish	
POST OFFICE	ADDRESS	Ko	metvägen	43									
City Täby				State		Zip	S-18	3348	Cou	ntry	Swede	en	
	ventors are	being	named on s	suppleme	ntal she	et(s) a	ttache	d hereto.					

Please type a plus sign (+) inside this box [+]

	DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet								
	Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor									
\	Given Name (first and middle [if any	yJ)	Family Name or Sumame								
	Jon , , ,	Karlsen									
	Inventor's Signature		Date								
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	POST OFFICE ADDRESS Halvdan Svartes gate 83										
	City Horten	State		Zip	N-31	186	Country	Norwa	у		
3-10	Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor									
>	Given Name (first and middle [if any	/])]) Family Name or Sumame								
	Arnulf /	Larsgard									
	Inventor's Signature	<u> </u>)		`Da	ate					
	RESIDENCE: City Holmestrand	State	. c	Country	No	orway	Citizens	ship	Norwegian		
	POST OFFICE ADDRESS Neverveien	7				_					
	City Holmestrand	State		Zip	N-30)80	Country	Norwa	y		

Atty. Docket No. 1935-00154